

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

**1 ACCOUNT #**  
(Ethics Commission filers)  
**10**
**2 Total pages this report:****3 CANDIDATE /  
OFFICEHOLDER  
NAME**

TITLE FIRST MI  
George  
NICKNAME LAST SUFFIX  
Biggs

**OFFICE USE ONLY**

Date Received  
**RECEIVED**  
**OCT 9 2001**  
CITY SECRETARY

**4 CANDIDATE /  
OFFICEHOLDER  
ADDRESS**

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
3323 Richmond Avenue  
Suite C  
Houston TX 77098

☐ Change of Address

Date Hand-delivered or Date Postmarked

**5 CAMPAIGN  
TREASURER  
NAME**

TITLE FIRST MI  
Marvy A  
NICKNAME LAST SUFFIX  
Finger

Receipt # Amount

Date Processed

Date Imaged

**6 CAMPAIGN  
TREASURER  
ADDRESS**  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
3323 Richmond Avenue  
Suite C  
Houston TX 77098

**7 CAMPAIGN  
TREASURER  
PHONE**

AREA CODE PHONE NUMBER EXTENSION  
(713) 526-3399

**8 REPORT TYPE**

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)  
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

**9 PERIOD  
COVERED**

Month Day Year THROUGH Month Day Year  
07/01/2001 09/27/2001

**10 ELECTION**

ELECTION DATE ELECTION TYPE  
Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special  
11/06/2001

**11 OFFICE**

OFFICE HELD (if any)

**12 OFFICE SOUGHT (if known)**  
Other - Houston City Council**13 DIRECT  
CAMPAIGN  
EXPENDITURE  
BY OTHER  
INDIVIDUALS**

... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages**GO TO PAGE 2**

# **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

**FORM C/OH**  
**COVER SHEET PG 2**

**14 C/OH NAME**  
George Biggs

**15 ACCOUNT #** (Ethics Commission filers)  
10

**16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

.. This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

**COMMITTEE TYPE**

**COMMITTEE NAME**

☐ **GENERAL**

**COMMITTEE ADDRESS**

☐ **SPECIFIC**

**COMMITTEE CAMPAIGN TREASURER NAME**

☐ additional pages

**COMMITTEE CAMPAIGN TREASURER ADDRESS**

**17 NO REPORTABLE  
ACTIVITY**

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

**18 CONTRIBUTION  
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 10.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS).

\$ 12755.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

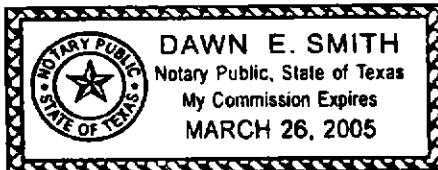
\$ 21978.56

**OUTSTANDING  
LOAN TOTALS**

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

**19 AFFIDAVIT**



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 16, Election Code.

*George Biggs*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said George Biggs, this the 5<sup>th</sup> day of October, 20 01, to certify which, witness my hand and seal of office.

*Dawn E. Smith*  
Signature of officer administering oath

Dawn E. Smith  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 3/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission filer) 10	
4 Date 07/10/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gerardo or Loretta Bueso,MD 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77004	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Midge Claiborne Contributor address; City; State; Zip Code [REDACTED] Houston TX 77027	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Donald R Collins,Jr.,M.D, Contributor address; City; State; Zip Code [REDACTED] Houston TX 77004	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 08/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Candace or Edward Cotham Contributor address; City; State; Zip Code [REDACTED] West University Place TX 77005	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Patrick Michael Donovan Contributor address; City; State; Zip Code [REDACTED] Houston TX 77027	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 4/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission filers) 10	
4 Date 08/20/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martha V or Jose G Galvan 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77018	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 08/01/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) C.M. Garver Contributor address; City; State; Zip Code [REDACTED] Houston TX 77023	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 07/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sandra Gunn Contributor address; City; State; Zip Code [REDACTED] Houston TX 77252	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/24/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) H A A Better Government Fund Contributor address; City; State; Zip Code [REDACTED] Houston TX 77099	Amount of contribution (\$) 4000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/13/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bruce J Harper Contributor address; City; State; Zip Code [REDACTED] Houston TX 77056-1903	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission files) 10	
4 Date 09/17/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Donald Hornbeck 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77002	7 Amount of contribution (\$) 50.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 09/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Houston Associated General Contractors PAC Contributor address; City; State; Zip Code [REDACTED] Houston TX 77092	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Aaron or Katherine K Howes Contributor address; City; State; Zip Code [REDACTED] Houston TX 77027	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/25/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mohammed Dilshad Kasmani Contributor address; City; State; Zip Code [REDACTED] Houston TX 77002	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Anne Lamkin Kinder Contributor address; City; State; Zip Code [REDACTED] Houston TX 77019	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 6/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission filers) 10	
4 Date 09/24/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nancy G or Richard D Kinder 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77019	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 08/29/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brady C Knight Contributor address; City; State; Zip Code [REDACTED] Houston TX 77027	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chris LaRue Contributor address; City; State; Zip Code [REDACTED] Houston TX 77008	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 08/20/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jonathan S Linker Contributor address; City; State; Zip Code [REDACTED] Houston TX 77007	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Joe Richard Martin Contributor address; City; State; Zip Code [REDACTED] Houston TX 77002	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 7/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission file) 10	
4 Date 07/10/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Edith S. McAllister 6 Contributor address; City; State; Zip Code [REDACTED] San Antonio TX 78209	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 07/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dr. Peter or Donna McKinney Contributor address; City; State; Zip Code [REDACTED] Chicago IL 60610	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Outdoor PAC Contributor address; City; State; Zip Code [REDACTED] Houston TX 77055	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Christie Patrick Contributor address; City; State; Zip Code [REDACTED] Houston TX 77019	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chad Pratkanis Contributor address; City; State; Zip Code [REDACTED] Houston TX 77019	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 8/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission files) 10	
4 Date 09/17/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jason Presley 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77002	7 Amount of contribution (\$) 30.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) William Patrick Redmond Contributor address; City; State; Zip Code [REDACTED] Houston TX 77006	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Republic of Texas Old Capitol Club, L.P. Contributor address; City; State; Zip Code [REDACTED] Houston TX 77002	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shannon Richards Contributor address; City; State; Zip Code [REDACTED] Houston TX 77007	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tom or Carolyn Rumney Contributor address; City; State; Zip Code [REDACTED] Houston TX 77040-2476	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 9/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission filers) 10	
4 Date 09/17/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Katherine M Schutzmann, M.D. 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77007	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 09/13/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gary Somberg Contributor address; City; State; Zip Code [REDACTED] Houston TX 77057	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 09/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ana M Trejo Contributor address; City; State; Zip Code [REDACTED] Houston TX 77098	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 07/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Deanne Tupcienko Contributor address; City; State; Zip Code [REDACTED] Houston TX 77046	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 08/01/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rachel Yarbrough Contributor address; City; State; Zip Code [REDACTED] Austin TX 78759	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A 1**  
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 10/14	
2 FILER NAME George Biggs		3 ACCOUNT # (Ethics Commission filers) 10	
4 Date  08/29/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) W.P. Zivley ..... 6 Contributor address; City; State; Zip Code [REDACTED] Houston TX 77002-3095	7 Amount of contribution (\$)  250.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
11/14**2** FILER NAME  
George Biggs**3** ACCOUNT # (Ethics Commission filers)  
10**4** Date  
07/27/2001**5** Payee name  
Blakemore & Associates**7** Amount  
(\$)  
4008.42**6** Payee address; City; State; Zip Code  
3323 Richmond Ave  
Suite C  
Houston TX 77098**8** Purpose of expenditure (See instructions regarding type of information required.)  
Consulting-\$4000 Courier-\$8.42**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held**Date**  
07/31/2001**Payee name**  
Blakemore & Associates**Amount**  
(\$)  
4500.00**Payee address; City; State; Zip Code**  
3323 Richmond Ave  
Suite C  
Houston TX 77098**Purpose of expenditure (See instructions regarding type of information required.)**  
Consulting Fees**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
08/15/2001**Payee name**  
Blakemore & Associates**Amount**  
(\$)  
144.30**Payee address; City; State; Zip Code**  
3323 Richmond Ave  
Suite C  
Houston TX 77098**Purpose of expenditure (See instructions regarding type of information required.)**  
Courier-\$19.30 Design-\$125.00**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
09/05/2001**Payee name**  
Blakemore & Associates**Amount**  
(\$)  
3000.00**Payee address; City; State; Zip Code**  
3323 Richmond Ave  
Suite C  
Houston TX 77098**Purpose of expenditure (See instructions regarding type of information required.)**  
Consulting Fee**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
12/14**2** FILER NAME  
George Biggs**3** ACCOUNT # (Ethics Commission filers)  
10**4** Date  
09/12/2001**5** Payee name  
Blakemore & Associates**7** Amount  
(\$)  
1018.44**6** Payee address; City; State; Zip Code  
3323 Richmond Ave  
Suite C  
Houston TX 77098**8** Purpose of expenditure (See instructions regarding type of information required.)  
Mail-\$316.50 Design-\$125 Courier-\$30.28 Print-\$546 -  
.66**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held**Date**  
09/05/2001**Payee name**  
CMGV Worldwide**Amount**  
(\$)  
2500.00**Payee address; City; State; Zip Code**  
3730 Kirby Dr  
Suite 418  
Houston TX 77098-3007**Purpose of expenditure (See instructions regarding type of information required.)**  
Consulting Fee**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
09/27/2001**Payee name**  
CMGV Worldwide**Amount**  
(\$)  
2500.00**Payee address; City; State; Zip Code**  
3730 Kirby Dr  
Suite 418  
Houston TX 77098-3007**Purpose of expenditure (See instructions regarding type of information required.)**  
Consulting Fees**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
09/27/2001**Payee name**  
Capitol Beverage Service**Amount**  
(\$)  
480.00**Payee address; City; State; Zip Code**  
401 Louisiana  
Suite 206  
Houston TX 77002**Purpose of expenditure (See instructions regarding type of information required.)**  
Food and Drink for Fundraiser**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
13/14**2** FILER NAME  
George Biggs**3** ACCOUNT # (Ethics Commission filers)  
10**4** Date  
09/27/2001**5** Payee name  
Joe Richard Martin**7** Amount  
(\$)  
150.00**6** Payee address; City; State; Zip Code  
909 Texas Ave  
Suite 203  
Houston TX 77002**8** Purpose of expenditure (See instructions regarding type of information required.)  
Room Rental for Fundraiser**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held**Date**  
09/27/2001**Payee name**  
E.D. Nevle**Amount**  
(\$)  
100.00**Payee address; City; State; Zip Code**  
909 Texas Ave#1305  
Houston TX 77002**Purpose of expenditure (See instructions regarding type of information required.)**  
Security for Fundraiser**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
08/14/2001**Payee name**  
SignMart**Amount**  
(\$)  
1688.70**Payee address; City; State; Zip Code**  
8222 Lockheed  
Houston TX 77061**Purpose of expenditure (See instructions regarding type of information required.)**  
Yard Signs**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held**Date**  
08/20/2001**Payee name**  
SignMart**Amount**  
(\$)  
1688.70**Payee address; City; State; Zip Code**  
8222 Lockheed  
Houston TX 77061**Purpose of expenditure (See instructions regarding type of information required.)**  
Yard Signs**Complete if direct expenditure to benefit C/OH \*\***  
Candidate / Officeholder name Office sought Office held

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:  
14/14**2** FILER NAME  
George Biggs**3** ACCOUNT # (Ethics Commission filers)  
10**4** Date  
08/09/2001**5** Payee name  
Vision America**7** Amount  
(\$)  
200.00**6** Payee address; City; State; Zip Code  
P.O. Box 1000  
Pearland TX 77588**8** Purpose of expenditure (See instructions regarding type of  
information required.)  
Dinner Sponsorship**9** Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held